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CONFIRMATION NO. 3713

Bib Data Sheet

SERIAL NUMBER 10/528,742	FILING OR 371(c) DATE 10/06/2005 RULE	CLASS 602	GROUP ART UNIT 3772	ATTORNEY DOCKET NO. JJM0620USPCT
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/GB03/04118 09/25/2003 which claims benefit of 60/486,445 07/14/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

UNITED KINGDOM 0222527.4 09/27/2002

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GBN	SHEETS DRAWING 1	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance				
Verified and Acknowledged	Examiner's Signature 	Initials			

**ADDRESS**

27777

**TITLE**

Wound treatment device

FILING FEE RECEIVED 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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